



Massachusetts Century Farms Registration Form

Current Farm Owner Information

First Name _____

Last Name _____

Your Mailing Address / Phone / Fax Numbers

Address: _____

City: _____

State: _____ Zip code: _____

County: _____

Home Phone: _____

Business Phone: _____

Fax Number: _____

Website: _____

E-mail Address: _____

Farm Information

Farm Name _____

Address of Farm (if Different from Your Mailing Address)

Address: _____

City: _____

State: _____ Zip Code: _____

County: _____

How many acres were in the original parcel? _____

Current number of acres? _____

Date the current owner acquired the farm: _____

Farm Ownership

| Prior owners related to current owner | First Name | Last Name | Year Acquired | Crops | What is the relationship of the Subsequent Owners to the Original Owner? |
|---------------------------------------|------------|-----------|---------------|-------|--|
| Original Owner | | | | | |
| SUBSEQUENT OWNERS | | | | | |
| Owner 2 | | | | | |
| Owner 3 | | | | | |
| Owner 4 | | | | | |
| Owner 5 | | | | | |
| Owner 6 | | | | | |
| Owner 7 | | | | | |

Questions? Contact: Diane Baedeker Petit, 617-626-1752, email: Diane.Baedeker@state.ma.us

Fax or mail this completed form to: Century Farms Registration, Massachusetts Department Food & Agriculture, 251 Causeway Street Suite 500, Boston, MA 02114, Fax: 617-626-1850.

-OVER-

Historical facts and interesting stories about the farm:

Please describe the farm operation today. What do you produce and how do you market your products?

What are your plans or hopes for the future of your farm?

INFORMATION PROVIDED ON THIS FORM WILL BE USED TO DETERMINE ELIGIBILITY AS WELL AS IN A FARM PROFILE BOOKLET, NEWS RELEASES, AND ON REQUEST TO NEWS MEDIA, RESEARCHERS, AND OTHERS.

Feel free to attach additional pages or relevant documentation.